

VS Form 1-27 Permit for Movement of Animals

This form is utilized when a premises has been diagnosed with a disease that requires special permission to move animals. These animals would be moving directly to slaughter or a special quarantine premises. It can also be used in other situations when positive control of the movement is necessary. A separate form must be used for each species. Close coordination must be done with the State Animal Health Official's Office and the VS Area Office to insure all state and federal movement requirements are met and the destination location is ready to receive the animals. The driver of the vehicle should be given contact information for possible problems en route.

This document is intended to give guidance on how to complete VS Form 1-27 and the continuation sheet, VS Form 1-27A. Recognize that these are not official directions and forms change over time. If you have any questions regarding how to complete this form, contact your VS Area Office. A properly completed form is critical to assure proper compliance.

1. **NAME AND ADDRESS OF SHIPPER OR CONSIGNOR:** Name and address of person or business shipping the animals, including zip code.
2. **CONSIGNEE:** Name and address of destination (slaughter establishment, quarantined feedlot, egg breaking establishment), including zip code.
3. **MOVED FROM:** Name and location of animal's current location if different than box 1 above.
4. **NAME AND ADDRESS OF OWNER AT TIME CONDITION DIAGNOSED:** If this information is the same as box 1 above, write "SAME"; otherwise provide the name and address, including zip code, of the owner at the time the condition was diagnosed.
5. **STATE WHERE ISSUED:** State where this form is issued.
6. **MOVEMENT TO BE:** Mark "INTERSTATE" if animals will be traveling to another state. Mark "INTRASTATE" if animals are only moving within the state.
7. **MOVEMENT FOR:** Mark "QUARANTINE" or "SLAUGHTER". If this form is being used for eggs going to a breaking establishment, write in "OTHER".
8. **DISEASE:** Indicate the disease suspected or diagnosed which required the issuing of this form.
9. **STATUS OF ANIMALS:** Provide the number of animals for each category.
 - NO. REACTOR:** Number of animals designated as reactors for the above stated disease (box 8).
 - NO. EXPOSED:** Number of animals that either tested negative or were not tested, but have been exposed to the above stated disease (box 8).
 - NO. OTHER:** Specify category (e.g. "SUSPECT") as well as the number of animals designated in this category for the above stated disease (box 8).
10. **STATUS OF HERD OF ORIGIN:** Official status of the herd of origin in regards to the disease stated in box 8. Example: Infected, Exposed, Suspect, etc. Use "N/A" if animals are a combined lot being re-consigned from a market.
11. **STATUS OF AREA OF ORIGIN:** Official disease status of the area where the animals originated from in regards to the disease stated in box 8. Example: Free, Class A, Stage V, etc. This information can be obtained from the State Animal Health Official's Office or the VS Area Office.

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- 12. NO. ANIMALS IN THIS SHIPMENT:** Number of animals documented and shipped on this form. If the form is being used for poultry products, write in the number as well as the unit (cases, boxes, crates, etc.). This number must equal the total animals designated in Box 9 above.
- 13. SPECIES:** List the species of animal being shipped. Use a separate form for each species if more than one species is being moved in the same vehicle.
- 14. TRANSPORTATION VEHICLE LICENSE NO. OR OTHER IDENTIFICATION NO.:** Provide a unique identification number (license plate number and state) of the vehicle being used for transport of these animals. If a tractor trailer, list the license number of both the tractor and trailer.
- 15. SEAL NO.:** Record all official seal numbers used. If vehicle is not sealed, write "N/A". Seals are not required on poultry trucks but are required on eggs whose movement is restricted because of *Salmonella enteritidis*.
- 16. VEHICLE REQUIRED TO BE CLEANED AND DISINFECTED AT DESTINATION:** Mark "YES" or "NO". Regulation concerning this requirement can be confirmed through the State Animal Health Official's Office or VS Area Office. Marking "YES" will require an inspector to verify the vehicle has been cleaned.
- 17. ANIMALS TO BE MOVED:** For groups of animals where unique individual identification is not required, write a single summary statement and include a range of back tags or tattoos, if applicable. Example: 95 head of market hogs "tattoo 36B8"; then mark mixed breed and mixed sex as applicable.
- COMPLETE EAR TAG NO.:** Record all permanent identifications present.
- BREED:** Use breed codes. See Breed Code Guide.
- SEX:** Indicate the sex of the animal (M – Male, F – Female, NM – Neutered Male, NF – Neutered Female).
- DISEASE BRAND:** Identify applied disease brand, if applicable.
- OTHER IDENTIFICATION:** List any non-permanent identification. Example: Sales tags, back tags, bangle tags, etc. If the animal has a current permit number, list the identification number from the original permit that authorized movement to the current location.
- 18. SIGNATURE OF INSPECTOR:** Signature of the individual issuing this form.
- 19. DATE ISSUED:** Date the form was signed.
- 20. TIME ISSUED:** Time the form was issued. The purpose of the time issued and the time void after is to allow for more specific control over the actual movement.
- 21. VOID AFTER DATE:** The void after date should allow for a reasonable amount of time for the movement of animals before this permit is no longer valid.
- 22. VOID AFTER TIME:** The void after time should allow for a reasonable amount of time for the movement of animals before this permit is no longer valid.
- 23. SIGNATURE OF OWNER OR SHIPPER:** Owner or shipper must sign this form, agreeing to the statement immediately above this area regarding delivery to consignee without diversion. If the owner or shipper is not available, the trucker may sign. Market organizations are not allowed to sign unless the market is the buyer/shipper.
- 24. TITLE:** Indicate whether the person signing is the "OWNER" or "SHIPPER". If this form is signed by the trucker, write in "TRUCKER".
- 25. DATE SIGNED:** Date the form is signed by the person identified in boxes 23 & 24

You would not complete the remaining boxes 26 through 34. Those boxes would be completed at the destination.

- 26. PLACE ANIMALS RECEIVED:** Name of place where animals were received.

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- 27. DATE ANIMALS ARRIVED:** Date the animals arrived at their destination and were received.
- 28. NO. ANIMALS RECEIVED:** Number of animals received in this shipment.
- 29. DATE SLAUGHTERED/QUARANTINED:** Date the animals were actually slaughtered or placed on quarantine.
- 30. DATE AND TIME SEALS BROKE:** Date and time the seal was broken. If no seal was applied, write "N/A". If vehicle was sealed, the individual who breaks the seal must be authorized by USDA to break seals.
- 31. AUTHORIZED SIGNATURE:** Signature of authorized individual at destination.
- 32. DATE CLEANED AND DISINFECTED:** If box 16 was marked "YES", indicate the date when the vehicle was cleaned and disinfected.
- 33. SIGNATURE OF INSPECTOR:** If box 16 was marked "YES", the person certifying the cleaning and disinfection of the vehicle must sign here. This will usually be a state or federal animal health official. In some instances a separate cleaning and disinfection certificate is issued to the trucker.
- 34. DATE SIGNED:** If box 16 was marked "YES", enter the date when box 33 is signed.

VS Form 1-27A Permit for Movement of Animals - Continuation Sheet

Although VS Form 1-27 does not have a box for page number, the continuation sheet, VS Form 1-27A does and each continuation sheet used should be numbered "Page X of Y". For example, if one VS Form 1-27 and 2 continuation sheets are used, the first continuation sheet would be numbered Page 2 of 3, and the second continuation sheet would be numbered Page 3 of 3. This page number information is listed in the upper right box of the continuation sheet. Right below that box is a box where the VS Form 1-27 preprinted number is listed. The VS Form 1-27 preprinted number is listed on each continuation sheet.

BOXES 1 THROUGH 4: These 4 boxes should contain the same information that is in boxes 1 through 4 on VS Form 1-27.

ANIMALS TO BE MOVED: This information will be in the same format as described for Box 17 on VS Form 1-27. A diagonal line should be drawn from the last animal listed to the bottom of the page and the diagonal line initialed.

The appropriate copy of each page of each continuation sheet must be attached to the appropriate copy of VS Form 1-27.